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ABSTRACT

Six social service agencies most utilized as resources for external support for students at Central Florida Community College are described. Individual students often have need for more specialized assistance to help them deal with the physical, social, and emotional problems of being disadvantaged, that prevent them from acquiring academic and vocational skills. The special services counselor and the learning disabilities specialist often receive referrals of students who manifest severe problems. There is coordination of effort between the college and social service agencies. The agencies are reviewed in terms of their function, eligibility requirements, and the service provided. These include: the Division of Vocational Rehabilitation; Bureau of Blind Services; Social Security Administration; Division of Family Services; CETA - Manpower; Human Resources Center (Mental Health); Division of Retardation; Veterans Service Office; Department of Community Health, Hospitals, and Clinics, civic and social clubs; State Employment Services; and State Diagnostic and Resource Centers. It is suggested that the ability to recognize when the needs of a particular student are not within the scope of one's personal resources or those of the school is a professional necessity. Personnel and agencies outside the school must be utilized because they are able to provide forms of specialized assistance not internally available. Case summaries, work evaluations, and psychological reports are presented as illustrations. A bibliography is appended. (Author/SW)

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ED209988

THE UTILIZATION OF SOCIAL SERVICE AND COMMUNITY AGENCIES AS EXTERNAL SUPPORT SERVICES

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Abstract

The Special Services Counselor and the Learning Disabilities Specialist often receive referrals of students who manifest severe problems. These students often need services beyond the scope of those provided by the institution. There is an on-going coordination of effort between the college and social services agencies. This presentation is designed to illustrate how the various social service and community organizations can be utilized as resources for external support services. Individual students often have need for more specialized assistance to help them to deal with physical, social and emotional problems of the disadvantaged that prevent them from acquiring academic and vocational skills needed to pursue a viable career. The following agencies will be discussed:

1. Division of Vocational Rehabilitation
2. Bureau of Blind Services
3. Social Security Administration
4. Division of Family Services
5. CETA - Manpower
6. Human Resources Center (Mental Health)
7. Division of Retardation
8. Veterans Service Office
9. Department of Community Health, Hospitals, and Clinics
10. Civic and social clubs
    A. The Lion's Club/Lioness International
11. State Employment Services
12. State Diagnostic and Resource Centers

The ability to recognize when the needs of a particular student are not within the scope of one's personal resources or those of the school is a professional necessity. Personnel and agencies outside of the school must be utilized because they are able to provide forms of specialized assistance not internally available.

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INTRODUCTION

The Special Services Counselor and the Learning Disabilities Specialist often receive referrals of students who manifest severe and handicapping problems. These students often need services beyond the scope of those provided by the institution. During the past six years, the currently funded Special Services Program has assisted physically disabled, epileptic and learning disabled students. Included have been 6 blind, four partially paralyzed, six known epileptic and approximately thirty learning disabled individuals.

There is an ongoing coordination of effort between the college and social service agencies. In the Marion County area, there exists a social services council made up of representatives from each of the public and private social services and civic organizations. This specific group serves as a planning and coordinating council, working to achieve cooperation among the various agencies to promote the improved delivery of services and to disseminate knowledge about new and existing services. Organizations of this nature should be identified and their services utilized by special programs personnel as resources for students.

The purpose of this document is to explain six of the social service agencies most utilized by our students as resources for external support. Individual students often have need for more specialized assistance to help them deal with the physical, social as emotional problems of being disadvantaged. that prevent them from acquiring academic and vocational skills needed to pursue a viable career. It is intended that counselor, teachers and administrators will become familiarized with the various services and their eligibility requirements.

The various agencies will be reviewed in terms of their function, eligibility requirements, and the service or services provided. Following the description of each human service agency will be a case summary, work evaluation or psychological report representative of the services offered.

The ability to recognize when the needs of a particular student are not within the scope of one's personal resources or those of the school is a professional necessity of the counselor. Therefore, personnel and agencies outside of the school must be utilized because they are able to provide forms of specialized assistance not internally available.

I. VOCATIONAL REHABILITATION

The Florida Office of Vocational Rehabilitation (VR) is a program sponsored by the Department of Health and Rehabilitative Services (HRS). This agency provides rehabilitation services to individuals who may have a physical or mental handicap that interferes with their ability to acquire and maintain satisfactory employment.

A. Eligibility. Two things are important in determining whether or not an individual is eligible for VR.

1. The individual must have a "handicap to employment" resulting from a mental or physical disability.
2. There must be a strong possibility that the individual can benefit from the services provided by being able to secure and maintain employment.

The rehabilitation process involves a series of steps aimed at helping an individual to prepare for, get and keep a job based on his abilities

B. Referral and Intake. Any person who lives in the state of Florida or the state where these services are offered, and is of or approaching, working age may apply for rehabilitation services by calling or writing for an appointment with the nearest Vocational Rehabilitation Office. School and college counselors, especially those who work in Federally Funded Programs should seek out and identify those disabled students and refer them to V.R. for assistance.

C. Vocational Evaluation. If up to data information is not available, VR will arrange for the client to have a complete medical examination at no cost. Also, a battery of tests to asses intellectual functioning, personality type, career interest and vocational evaluation is administered. The vocational evaluation is used to determine the kinds of jobs an individual would be good at and most satisfied with.

D. Rehabilitation Planning. If an individual is eligible to receive services, the V.R. counselor will assist the individual in developing a realistic plan for rehabilitation. This is called an Individual Written Rehabilitation Plan (1 WRP). This plan usually includes both long and short term goals. Short term goals are actually small parts of long term goals that must be achieved in order to reach the long term goal. An example might be to begin studying in the area of secondary education (short term goal) to become a high school art teacher (long term goal).

E. Treatment. If an individuals personal finances are insurance benefits are not sufficient to pay for those appliances or aids that would enable him to work, V.R. may help to defer these expenses. Medical, surgical or psychological care can be provided on a short term basis reduce or remove the effects of a disability. Wheelchairs, artificial limbs, hearing aids, and special lenses can be purchased by V.R., when necessary to help the individual to gain and maintain employment. This also includes any mechanical adjustments, fittings and training necessary for proper usage and maintenance.

F. Training. Many jobs require specialized training or education. VR can pay the expense when these services are needed, depending upon the individuals ability to succeed. Three areas of training are usually provided.

1. Work adjustment training. For some individuals who are handicapped, it is often difficult to re-adjust socially and psychologically to the world of work.

2. Vocational training. This may be accomplished in a number of different settings. Available options may include Colleges and Universities (Special Services Projects), technical and trade schools, rehabilitation workshops and on the job training.

G. Placement. Once the individual is capable of working, the placement process begins. The V.R. counselor usually gives advice on completing applications and interviewing for jobs. The counselor also maintains current information on job openings and employers who may be interested in employing a qualified handicapped person.

H. Closure. After the client has worked or successfully maintained steady employment over a period of time, the counselor will discuss with the client if it is feasible to close the case. It must be determined that the client no longer needs V.R. Services.

Other services offered by VR to help a client to reach his or her rehabilitation goals include homaker services, attendant services, architectural assessibility and modifications to the home to help overcome physical barriers. Under special circumstances, VR may help with additional expenses for equipment, tools, supplies, books, licenses, travel expenses, room and board, child care. Transportation and interpreters for persons who are deaf are also available.

II. C.E.T.A. - MANPOWER

The CETA (Comprehensive employment training act) Manpower Program is a Federal Program designed to provide assistance for unemployed or underemployed persons from poverty level income families. The CETA Manpower Program in the Marion County area is divided into two seperate distinct sections. One operated by the Marion County Commission and the other by the County Board of Public Instruction. This section is referred to as the education section under CETA (titles I and II).

Each program has a different purpose or group of people it can serve.

A. Classroom Training. Classroom training is offered through the Special Services Program at Central Florida Community College. This type of training is used to supplement a persons income by paying for each hour of class attended. This will generally enable a person to afford to go to school and improve or acquire the necessary skills to acquire a better job. Participation in this aspect of the program involves working toward one of the following career objectives:

1. A.A. or A.S Degree
2. Vocational/Technical Training
3. High school diploma or equivalent

1. Eligibility
   a. Meet the low income criteria
   b. Be at least 16 years of age or older
   c. Be in regular attendance at school
   d. Attend school full time
   e. Maintain satisfactory academic progress

B. The Coupled Program. The Coupled Program combines the classroom training program and the work experience program. This program is only for those who are already in the classroom training program and need additional financial assistance to remain in school. The program provides part-time work experience in a government or non-profit agency for eligible students.

1. Eligibility.

   a. Be enrolled in the CETA Classroom Training Program.
   b. Be at least 16 years old or older.
   c. Maintain satisfactory grades in school.
   d. Limit classroom and work hours to a maximum of 40 hrs. per week.

C. Summer Youth Program. The Summer Youth Program allows students to work during the summer to supplement family income. The program provides work experience and counseling for students with limited previous job experience. Central Florida Community College has provided positions for students as well as the Special Services Program counseling and tutorial components. Students have been employed as tutors, typists, receptionists and peer counselors.

1. Eligibility

   a. Meet the low income criteria.
   b. Be at least between 14-21 years of age.
   c. Attend Orientation sessions.
   d. Accept job responsibilities.
   e. Meet regularly with the CETA Counselor.

III. BUREAU OF BLIND SERVICES

In 1945 the State of Florida was the first to establish a rehabilitation and adjustment center for blind citizens and has since developed a new facility. Helen Teller, the famous crusader for the blind made a plea for the new agency along with members of the Florida Lions Club. After several reorganizations, the Division of Blind Services is located in the Florida Department of Education. A five member advisory board appointed by the commissioner of education with lay citizen participation assists agency personnel in planning programs to help blind persons of all ages to attain their maximum physical, vocational, social and economic usefulness.

A. Eligibility. Individuals who reside in the state who are visually handicapped, blind or threatened with blindness. The services offered are divided into two categories: (1) Medical and social services for blind children and older adults. (2) Vocational rehabilitation services for potentially employable blind persons.

The division of Blind Services has its own vocational Rehabilitation Program. It is jointly funded by the state and federal government. The program provides a wide range of services designed to assist blind and visually impaired individuals in preparing for and achieving gainful employment. The individual may need a broad range of medical-psychological, social and vocational training services. The agency makes special effort to insure adequate job placement in keeping with individuals interest, training and ability. The following services are designed to assist clients in achieving employment.

1. Assessment
2. Counseling
3. Medical Services
4. Locational Training
5. Supportive Services
6. Job Placement

IV. SOCIAL SECURITY ADMINISTRATION

The basic idea of social security is that during one's working years, employee's and their employers and self-employed pay social security contributions. This money is used to pay monthly social security benefits to people currently receiving benefits and the administrative costs of the program. When an employee's earnings stop or are substantially reduced because of retirement, disability or death, benefits will be paid to them from the contributions of people in covered employment and self employment at that time. Social Security benefits are intended to replace part of the earnings the family has lost.

The contributions provide the money for medicare hospital insurance, to help pay hospital bills of workers and their dependents after they reach age 65. Persons who have been entitled to social security disability checks for 2 consecutively or more also have the protection of medicare hospital insurance.

Medical insurance is the part of Medicare that helps to pay physicians for their services and to cover other medical expenses incurred by individuals who sign up and are eligible for such coverage. The Federal Government pays more than two-thirds of the total cost of the medical insurance premium.

As an example, lets assume that the father of a family including a wife and two children died as the result of an accident. If he had maximum earnings covered by social security each year, his widow and dependent children would receive monthly benefits in social security checks, at present benefit rates. It is likely that the family would get increased benefits in future years, because the social security law provides for automatic increases as the cost of living rises. At age 60, the widow could receive additional monthly benefits, and the children could receive benefit payments until age 22 if they remain in school or college. As a result, the financial burden of the family will be greatly eased. The family can stay together, the children can complete their education. Disabled children, including those who are severly mentally retarded, can receive a lifetime income. A disabled worker and his or her family, can be assured of an income that will continue as long as the worker is disabled. A disabled person may also receive rehabilitation services to help him or her return to productive employment. These services may be paid for by social security.

A. Supplemental Security Income (SSI). This is a Federal program that pays monthly checks to persons in financial need who are 65 years of age or older and to persons in need at any age who may be blind or disabled. The aim of the program is to provide monthly checks as a source of basic cash income for these individuals. The basic payments are $189.40 a month for one person and $284.10 for a married couple, effective July 1978. Some individuals receive more and others less because they may have other income or because they live in a state that further supplements the Federal payment. In most states, a person who is eligible for SSI is also eligible for Medicaid and social services provided by the state.

1. Eligibility.

Individuals who have little or no regular cash income, property or other investments that can be turned into cash, such as jewelry, stocks, bonds or other valuables may receive SSI.

In addition, eligibility for payments based on blindness or physical disability depend upon the severity of the applicants condition.

To be considered disabled, a person must be unable to engage in substantial gainful work because of a mental or physical impairment which has lasted or is expected to persist for at least one year or which may be expected to result in death.

A. Blindness under the regulations of the SSI program is defined as central visual acuity of 20/200 or less in the better eye with the use of corrective lens or visual field restriction of 20 degrees or less.

B. A retarded adult person is considered disabled if it is shown that:

* IQ is 49 or less
* IQ is 50-69, with an inability to perform routine, repetitive tasks, and a physical or mental impairment resulting in restriction of function.
* There is evidence of mental and social incapacity which creates a marked dependence on others for meeting personal needs, characterized by inability to communicate effectively, to avoid danger or follow simple directions and inability to read, write and perform simple calculations.

V. THE VETERANS ADMINISTRATION

Through the Central Florida Community College Veterans Affairs Office a variety of services are available to discharged military veterans who desire to further their education or acquire specialized training. According to the V.A. coordinator, a primary function of that office is to eliminate or reduce factors which distract from the individuals educational goals.

A. Eligibility. Students may apply for deferment of fees if eligible for VA educational benefits under Chapters 32, 34, or 35, title 30, U.S.C. New students are required to present a copy of their D.D. Form 214 when applying for benefits.

The veterans administration will pay benefits for a discharged veteran to attend high school, college or learn a trade, either on the job or an apprenticeship. If a veteran is unable to follow a full-time course of instruction, he or she is eligible to study on a part-time basis. Less than full-time schooling will generally extend eligibility for a longer period. Veterans may also receive loans up to $1500 as an additional source of financial assistance if their educational expenses exceed their financial resources. If a veteran is enrolled in a post-secondary program on a half-time or more basis and need special help to pass a required subject, he or she may receive a special allowance for individual tutoring. To be eligible, it must be shown that the veteran does have a deficiency in a particular area, making tutoring necessary. The tutor must be considered qualified by the school. The payment may not exceed $65 per month, to a maximum of $780.

A veteran may change from one program ot another. Some changes require the necessity of counseling by a certified V.A. counselor or representative.

Some of the services that are made available to eligible veterans are:

Counseling Services. Any number of personal academic or health related problems may arise to interfere with educational pursuits. The Counseling Department or Special Services Program personnel can assist with individual and group counseling referrals for academic placement, career interest concerns, alcohol and substance abuse, financial aid, family counseling and other health related and personal matters. VA students are requested to contact the Special Services Director or counselor immediately if they are experiencing any problems maintaining satisfactory academic or vocational progress. Satisfactory progress and attendance are required to continue receiving V.A. educational benefits. The required standards of progress are outlined in the college catalog.

Tutorial Assistance. Veterans and eligible dependents enrolled in post-secondary education and training programs at least half-time may qualify for this service. A VA student having difficulty with any course should contact his instructor, Special Services Project Counselor and the nearest V.A. office. The V.A. office will assist in processing the necessary documents for V.A. tutorial assistance payments. These payments may not exceed $69.00 per month for a maximum of $828.00 and are not charged against what the student is basically entitled to receive in the way of benefits.

Financial Aid. V.A. students are encouraged to apply for financial aid. As a result of the Middle Income Student Assistance Act that was signed into law by President Carter on November, 1978, there has been a significant increase in the number of students who are eligible for federally based and campus based sources of financial assistance.

Cooperative Education and Career Placement Office. Veterans are usually financially independent and often need additional income while attending college. The Cooperative Education and Placement Office on campus works closely with the State Employment Service and local employers in maintaining a current listing of employment opportunities available. Students may also earn college credit through courses in COOP while working on a job related to their major area of interest.

As an example, an additional change of program may be approved by the V.A. if the changes are necessitated by circumstances beyond the V.A. students control and the program is found through VA counseling to be suitable to the students interests, aptitudes and abilities.

A brief description of other benefits available to veterans are as follows:

1. GI Loans: The VA will guarantee eligible veterans a loan for the purchase of a home, mobile home, or condominium.

2. Disability Compensation: The VA pays compensation for disabilities incurred in or aggravated by military service.

3. Medical Care: The VA provides complete hospital care concerning the full range of medical services. Outpatient treatment is available for all service connected conditions, or non-service connected conditions in certain cases. Treatment is available for alcoholism and substance abuse or dependence. The VA also provides outpatient dental care to legally intitled beneficiaries. Some veterans receiving vocational rehabilitation training under the V.A. or who have dental disabilities resulting from service injuries have no time limitation on the availability of dental treatment services.

4. Employment: Assistance is available in finding employment in private industry, in federal service and in local government.

5. Reemployment: There are federal regulations governing veterans having the opportunity to return to their former place of employment.

6. Unemployment Compensation: The amount of benefit and the payment period vary between states. A veteran is encouraged to apply soon after seperation or discharge.

7. GI Insurance: Low-cost life insurance is available for veterans with service-connected disabilities. Totally disabled veterans may apply for a waiver of premium on these policies.

*Service members who enlisted prior to January 1, 1977, may use the GI Bill. Those who enlisted after January 1, 1977, may use funds accumulated as a result of participation in the Veterans Educational Assistance Program (VEAP). The VEAP is a contributory program that enables a soldier to build a fund of up to $8,100 for future education. The soldier makes contributions of $50 to $75 a month to an educational fund. His or her contributions are matched $2 for $1 by the Veterans Administration.

If additional information is needed or assistance regarding Veterans benefits, the following offices can provide information:

a. Regional Veterans Administration Office
b. Local representatives of Veterans Organizations and the American Red Cross
c. Veterans Administration 810 Vermont Ave. N.W. Washington, D.C. 20420

VI. COMMUNITY MENTAL HEALTH CENTER

The West Central Florida Human Resources Centers, Inc. is a nonprofit corporation designed to provide a broad array of Mental Health Services to the citizens of Marion, Citrus and Levy Counties. The center is a Community Mental Health Center as defined by Public Law 94-63 and offers all of the services as Mandated.

The center does not employ anyone as a therapist who does not have at least a terminal Master's degree in a mental health discipline and has successfully completed an approved clinical internship.

No one is refused service because of inability to pay. The general cost of service is $40.00 per hour which may be discounted according to ability to pay.

A. Emergency Services: The center provides 24 hour emergency mental health services. These services include 24 hour toll-free telephone crisis counseling and intervention, counseling and intervention for troubled individuals and their families and face-to-face evaluation. The Emergency Mental Health Team works closely with all concerned community agencies to provide the most appropriate support services.

B. Adult Outpatient Services: The adult outpatient division services offer a comprehensive diagnostic evaluation, psychosocial history, mental status determination and an individualized goal-oriented treatment plan. This is usually followed by assignment to a therapist for the recommended treatment modality, individual, conjoint, family or group therapy, as well as scheduled appointments with the staff psychiatrist for consultation and or chemotherapy as needed. Psychological testing is available from the staff psychologist when deemed appropriate.

C. Day Treatment Program: This program is provided for adults with psychiatric difficulties who need more intensive treatment than is available through the outpatient division, yet not so severely disabled as to require inpatient hospitalozation. This program is not capable of handling persons who are likely to harm themselves and others, or are so agitated or disoriented that they would disrupt or fail to benefit from the treatment program. The intensive therapy program includes group therapy, recreation activity therapy, leisure education, limited occupational therapy (with referrals for appropriate vocational rehabilitation), and various educational programs (i.e., job seeking skills, daily living skills, money management and assertiveness training, etc.). Transportation to and from the program can be provided on a limited basis. The treatment goal is to prevent rehospitalization and promote functioning in the community.

D. Alcohol Services:

1. Detoxification Services: Medical Management for withdrawl from alcohol intoxication is provided in the community in a 15-bed facility. The program provides supportive individual, group

and family therapy, evaluation and treatment planning, and referral to follow-up treatment and Alcoholics Anonymous.

2. Residential Services: The Human Resources Center provides a facility located in the community for a residential program of intensive and immediate care provided for up to 20 alcoholics needing a residential setting. The program provides individual, group or family (outpatient) therapy with strong emphasis placed on return to gainful employment and person independence. Individuals are encouraged to remain in counseling after leaving residence and to actively participate in Alcoholics Anonymous. An alcoholic client and his spouse may attend the intensive treatment program on a day patient basis and return home at night.

E. Drug Program: The center recognizes that drugs are all around us and it is also their belief that, when used properly, drugs can be helpful. An increasing number of people misuse drugs by consuming them for the wrong reasons, too frequently, or use combinations of substances that create highly dangerous drug reactions.

The program places its emphasis upon prevention through education. This includes a wide range of efforts to help people.

1. Develop skills and talents.
2. Become confident and have a sense of their own worth.
3. Learn to make wise decisions about their own bodies and lives.

In addition to the above, the Drug Abuse Prevention/Education Program provides consultation, education, referral, speakers and workshops for:

1. Schools
2. Churches
3. Criminal Justice Units
4. Parents
5. Parent Groups
6. Civic Groups
7. Other Professionals

An overall treatment program is provided for those who have drug related problems. This includes:

1. Individual, group and family counseling.
2. Medical and Psychiatric Consultation.
3. Detoxification and residential treatment through cooperating units.

F. Employer Assistance Program: This program is designed to achieve two goals. First, it allows a troubled employee to get professional help with a problem before it reaches proportions where it affects work performance and ultimately job security. Secondly, the program provides an employer with an affective means of controlling lost productivity that would ordinarily be the result of such problems.

Other programs provided by the Human Resources Center include:

1. Consultation and Education. Consultation is provided to human service organizations, volunteer groups or individuals who are concerned about the quality of their inter-personal relationships.

2. Crisis Stabilization Services. Provides short-term 24-hour care (up to 6 days) for persons suffering from emotional disturbances who do not require the full services of psychiatric hospitalization.

3. Childrens Services. Serves children between the ages of 2 and 17. Included among the therapeutic services are individual, group, family and play therapy. Also available are educational groups for parents and psychological and psychoeducational evaluations.

4. Gerontology Services. The Human Resources Center has a commitment to serve senior citizens. Such services available are:

    a. Counseling; individual, conjoint, family, groups, dealing with such issues as: marriage, pre-retirement, loss, death and dying.

    b. Chemotherapy when appropriate.

    c. Evaluation and testing.

    d. Day treatment.

    e. Detox and treatment for substance and alcohol abuse.

    f. Referral to other appropriate community services.

    g. Training assistance in areas of aging to community agencies who are providing direct services to senior citizens.

    h. Consultation to agencies, families and individuals who are struggling with special problems in dealing with the aged.

i. Telephone reasurrance by trained volunteers.

j. Group activities and leisure education for those Seniors who can benefit from therapeutic activity.

5. Transitional Services. Adult services will provide appropriate living arrangements for clients who have been discharged from a mental health facility, and others in need of such placement.

VII. OTHER COMMUNITY AND SERVICE AGENCIES

A. Florida Department of Health and Rehabilitative Services.

1. Services: Provides financial assistance under Aid to Families with Dependent Children(AFDC), Cuban refugee program, Indo Chinese refugee assistance. Eligibility is based on income, family size and situational factors.

   a. Medicaid: Provides payments for medical services to AFDC and SSI recipients.

   b. Food Stamps: Applications for USDA Food Subsidy Coupons. Eligibility based on income, family size and county residency.

B. Florida Developmental Disabilities.

1. Services: Diagnosis and evaluation, rehabilitation plan aided by appropriate community programs where necessary. Placement outside of home to Foster Homes, group homes or sunland centers. Facilities throughout the state are used to meet client's needs, children in need of diagnostic evaluation for retardation. Eligibility is based on an IQ below 84. The disability must have been diagnosed prior to age 18 and continues, or can be expected to continue, indefinitely and constitutes a substantial handicap. Mental retardation is only one type of developmental disability. Developmental disabilities were defined in 1970 by the Florida Developmental Disabilities Services and Facilities Construction Act as a handicapping condition attributable to epilepsy, mental retardation, cerebral palsy, or other neurological conditions. PL 94-103 of October, 1975, amended the Acts definition to include Autism, in certain cases, dyslesia - a disturbance of the ability to read.

C. Department of Community Health, Hospitals and Clinics.

1. Services: Physicals by appointment. Maternity, family planning, nutrition counseling and weight control. Dental care for children of low-income families. School Nursing service, screening for vision, hearing and speech therapy. Home nursing, health aids, physiotherapy under medicare and medicaid. Cancer closet of supplies. Services are free to low-income families. Payment for special services, but no one is rejected if unable to pay. Additional services include health education and counseling, referral to private physicians, routine immunizations, sickle cell, insulin, TB, Rheumatic Fever, anti-convulsive medication, TB skin tests, limited X-rays, VD treatment, and medicaid.

D. Marion Community Hospital. Full array of hospital services except emergency room, maternity or psychiatric care.

E. Munroe Regional Medical Center. All hospital services including drug rehabilitation placement.

F. Shands Teaching Hospital. J. Hillis Miller Health Center, Univeristy of Florida.

G. Florida State Employment Service.

Services: Finds employment for unemployed and underemployed. Job Corps provides education and training for youth 16-21. Job training for migrants. Other job related services include:

*information about on-the-job training and vocational training.
* aptitude testing.
* typing, spelling, and shorthand testing for clerical workers.
* information about the local job market.
* assistance in solving a problem involving fair treatment by an employer or government agency.

In summary, a multitude of external resources are often available. Administrators and other helping professionals should identify these resources and exercise utilization of their services in view of the needs and problems of the students that they serve. Other agencies that students have been referred to for assistance exclusive of the social service agencies are the Lions Club, and the Lioness Clubs International that provide assistance to the visually handicapped, the Legal Aid Service, the Public Housing Authority, the U.S. Health Testing Clinic, Speech and Hearing Clinic, Unemployment Compensation Bureau, Recordings for the Blind and the National Library Service for the Blind, Library of Congress, individuals, groups representing the deaf and other social clubs and organizations that provide scholarships to students in postsecondary institutions.

PART II: CASE SUMMARIES

The following is an example of a report received on the student, B.B. from the community mental health center.

HUMAN RESOURCES CENTER: MENTAL HEALTH SERVICES
DIAGNOSTIC ASSESSMENT AND TREATMENT PLAN

Name: B.B.
DOB (Date of birth): 4/9/45
Therapist: G.G.
Date of Report: 5/79
Halfway House

During the interview, Mr. B.B. appeared depressed, guilty, defeated, and angry towards himself and others. His ego defense mechanisms appeared as follows: being vague, somewhat evasive, and subject switching.

TENTATIVE DIAGNOSIS

Primary: 303.20 Alcohol Addiction
Secondary: 301.81 Passive/Aggressive Personality

PROBLEMS

1. As a result of losing his driver's license by neglect of renewal, Mr. B.B. began to drink as a result of inability to deal with uncomfortable feelings about the event.
2. Even after two years of extended sobriety, Mr. B.B. feels that his family refects him and tends to treat him in a distant way.
3. Mr. B.B. states that he has had numerous problems with school records which help precipitate his drinking.
4. Mr. B.B.'s apparent difficulty dealing with anger towards others and himself.

GOALS

1. Developing a trusting relationship with his Halfway House therapist so that a more detailed treatment plan can be developed.
2. Helping Mr. B.B. to get more in touch with his feelings so that he can begin to focus on his feelings rather than the event in terms of problem-oriented issues.
3. Helping Mr. B.B. to categorize his issues of a problem orientation so that he can deal with the highest priority first.

GOALS-LONG TERM

1. Helping Mr. B.B. to deal with his feelings of anger toward himself and others.
2. Helping Mr. B.B. to establish goals in his life that are easily obtainable so as to enhance sober living.
3. Help Mr. B.B. deal with feelings of rejection, supposedly imposed on him by his relatives.

_____ _____
G.G., B.A., Alcohol Counselor II Date

_____ _____
S.S., M.A., Coordinator of Emergency and Crisis Stabilization Services Date

BUREAU OF BLIND SERVICES:

COUNSELING CENTER EVALUATION SERVICES

EVALUATION OF: R.R. DATE: November 1972
EXAMINER: T.T. COUNSELOR: K.K.

I. BEHAVIORAL OBSERVATIONS AND TEST RESULTS

R.R. is an eighteen year old male who is blind but can discern objects in daylight and at night when there is enough light. He is quite bright as well as out-going and appeared self-confident and open during our interview.

R.R. described himself as able to "get along will with people." This is indicated by his involvement in extracurricular activities such as senior class president and exhange club.

Previously R.R. has attended the Florida School for the Deaf and Blind until last year when he attended public high school (11th grade) and obtained a 3.6 average academically. R.R. has done equally well this year with mostly A's and B's.

R.R. is quite independent and is able to walk along unaided; his only problem being night mobility when there is insufficient light. He will be attending the summer-prep program to help correct his mobility problems. Being wuite confident, R.R. is eagerly looking forward to college and feels that Florida State University has more to offer than the University of Florida. He already has bling friends there and has stayed in a dorm and likes it. His tentative goal is a major in psychology but that might change later.

R.R.'s scores on the Wechsler Adult Intelligence Scale (WAIS) are exceptionally good, with an IQ of 120 or superior intelligence. He scores above average in all areas, showing good arithmetic mental skills, verbal ability, awareness of the world around him, memory and ability to reason in the abstract. Only vocabulary is slightly below average. The results of the School and College Ability Test (SCAT) indicate a verbal score within the 51-70 percentile range, slightly above the median. the quantitative score is within the 14-34 percentile range, but this score is not an accurate indicator of R.R.'s arithmetic ability. He knows how to work most problems and does will on those he attempts. His major difficulty is mechanical in having to work out the problems in his head.

II. INTERPRETATION AND RECOMMENDATIONS

R.R. seems to have superior intellectual ability and should be a successful student at a 4-year college. If any remedial work were needed, it would be in the areas of vocabulary, some reading comprehension, and working faster math computation.

R.R. is eager to "further his education" and seems to have the confidence and ability to do well socially. Although he appears quite independent and mobile, night mobility training is needed. The Florida State University summer-prep program is also recommended.

VOCATIONAL REHABILITATION

A Vocational Assessment of A.A.

A.A. was seen at the OVR ofice in Ocala on October -1979 at the request of his OVR counselor, D.D. Purpose of the evaluation was to procide appropriate vocational direction in light of his stated disability of total hip replacement Arthroplasty of left hip resulting from an auto accident.

IDENTIFICATION AND BACKGROUND INFORMATION:

Mr. A.A. is a 25 yr. old married black male whose current household consists of himself and his wife and two daughters. Both daughters are yound, the oldest being three years old and the youndest being five months old. Mr. A.A. indicated that he normally babysits with his daughters during the day while his wife works.

Mr. A.A. is currently receiving SSDI benefits of $536.00 per month. He estimates his wife's income is $10,000 per year. He states that she works as an accountant. Mr. A.A. was on time for the evaluation and was appropriately dressed. He makes a very nice appearance. He was friendly and cooperative throughout the day and appeared to be at ease. I believe he put good effort into his testing.

PRESENTING PROBLEMS:

Medical information indicates that this client underwent a left total hip arthroplasty for traumatic arthritis of the left hip following a central fracture dislocation. His total hip arthroplasty was 2/15/78. The records indicate that the client ahs had problems with progressive development of a flexion contracture of the left hip and much hip pain and back pain. The records indicate that the client complains of continued pain in the left hip and groin with continuing flexion contracture and decreased range of motion. Records indicate that the client underwent a splenectomy due to motor vehicle accident in August, 1977.

Mr. A.A. himself state that in 1976 he was driving a small car and was hit broadside. He states that he received injuries to his pelvis, spleen, and other internal injuries. He was in the hospital for three months an was discharged on crutches. Mr. A.A. states that he still experiences some pain most of the time. He states that he has had a spleen operation as well as two operations on his left hip. As a result of the above accident, Mr. A.A. states that he is unable to lift over 20 lbs. He usually uses a cane when walking. He states that his right leg bears most of the weight of his body when walking or standing.

Mr.A.A. states that he is currently taking no medication. He indicated some dislike for taking any type of medication. Mr.A.A. indicates that he was always in good health prior to his current situation. He claims no prior illnesses, injuries, or operations aside from that already mentioned. Mr. A.A. indicates that he has never received workmens compensation benefits. He states that he does not use cigarettes but that he does use alcohol to help him relax occasionally.

CLIENT"S SUBJECTIVE STATEMENT OF PHYSICAL ASSETS AND LIMITATIONS:

Dominant hand is left.

LIFTING: Mr.A.A. states that he is able to lift his baby who weighs 11 lbs. He states that he does experience some discomfort and could not lift much more than this.
CARRYING: Same as above.
PUSHING: States that he does use his push lawnmower and finds that his left leg tires quickly.
CLIMBING: States he has not attempted to climb a ladder since his accident but believes he could do so.
BALANCING: Mr. A.A. reports that he feels unstable much of the time and feels that his sense of balance has been effected.
BENDING: States he does not normally bend at the waist to pick up objects from the floor.
KNEELING: States he could kneel for brief periods of time without undue discomfort.
CROUCHING: Would not normally attempt.
REACHING: Claims no restrictions in his ability to reach in all directions including overhead and in back of his head.
HANDLING: Claims good ability to work with his hands.
HAND STRENGTH: Claims fairly normal hand strength but adds that it has probably decreased somewhat due to being out of shape.
FEELING: States his left leg gets numb occasionally.
TALKING: No problems claimed
HEARING: No problems claimed, states he has never worn a hearing aid.
SEEING: States that he had trouble passing his vision test to get his driver's license recently. Believes that he is in need of glasses at this time.
SITTING: States that if it is a rainy day he can sit for about one hour. If it's a good day, somewhat longer.
STANDING: Estimates that he can stand using his cane for about thirty minutes. Adds that he usually stands with most of his body weight on his right leg.
WALKING: Estimates that any walking is uncomfortable for him.
RUNNING: He would not attempt, added that he does ride a bike for exercise.
DRIVING: States that his back gets stiff after awhile and begins to hurt.
JOLTING: States that jolting would bother his back and his hip.
CLIMATE: States that cold or damp weather, especially cold weather, increases his pain level.

VOCATIONAL, EDUCATIONAL, AND MILITARY BACKGROUND:

Mr. A.A. states that he completed high school whicle living in Michigan. While in high school he took some graphic arts courses. After leaving high school he went to work at Sycor, an electronics firm. He worked there for several years, until the time of his accident. He states this has been his only job. Mr. A.A. claims no contact with the military.

TESTING RESULTS:

The Revised BETA Examination was administered and resulted in a Revised BETA IQ of 84. A score of 0 to 10 is considered average or normal. The above score would place A.A. in the dull or slow learner class. This would indicate that he would have limitations in his ability to successfully pursuse academic or vocational studies. The Slosson Oral Reading Test was administered. Results indicate that Mr. A.A. is reading at between the seventh and eighth grade levels. His current reading skills should be adequate for his own needs and for the needs of many lower level vocational training programs. He does need to upgrade his reading skills and has indicated a definite interst in doing so. A simple math test was administered. Mr.A.A. demonstrated that he is able to successfully work addition, subtraction, and multiplication problems. He has some confused knowledge of working division, fractional, and percentage problems. He does need to upgrade his mathematical ability. He has also indicated a definite desire to do this.

The Purdue Pegboard was administered. This test is designed to determine the degree of skill and speed a person has in working with their hands. Mr.A.A. rated above average overall, rating at around 60th to 65th percentile overall. The whole body range of motion work sample was administered. This work sample measures the agility of a person's gross body movements of the trunk, arms, hands, legs, and fingers as they relate to the functional ability to perform job tasks. This is an extended work sample normally taking about one-half hour to complete and requiring the ability to work at various positions including standing, working overhead, with arms outstretched, and in a kneeling or crouching position. In the first part of the work sample, which involved going from the arms out position to the arms overhead position, Mr.A.A. complained only of some tiredness in the left arm at the shoulder joint. He added that he experienced some discomfort in his right leg any time that he stands. On the second part of the work sample which involved going from the overhead position to a slightly stooping position, Mr. A.A. experienced some pain from the low back area to the shoulder area, going into his left shoulder. He experienced some tiredness from the low back area down both hips and into both legs. He added that his left leg felt a little numb. The third part of the work sample involved going from a slightly stooped position to a kneeling position. Upon completion of this part of the work sample, Mr.A.A. states that he experienced tiredness in his lower to upper back but no pain. He experienced no pain or tiredness in the knee area. The final part of this work sample involved going from the kneeling position to a standing and arms out position. Mr. A.A. indicated that he felt some tiredness in both shoulders and at the shoulder joint and on his back. He did not however experience pain at that time. Overall, it would appear that Mr. A.A. will be primarily limited in the area of bending. He did state that his

worst problem is his back. Time taken to complete this extended work sample was in the range of average. As compared to a nonemployed norm group he rated somewhat above average. As compared to an employed group he rated somewhat below average. Overall I would view his performance on this work sample as encouraging. He did state he would be unable to do this type of activity involving working in so many positions on a eight hour day. He state this would be mainly due to the amount of bending involved.

The Gordon Occupational Check List was administered. This Check List is designed to determine the relative degree of interest a person has in the areas of business, outdoor, artistic, technology, and service. Mr. A.A. demonstrated a high degree of interest in the area of technology and a low degree or no degree of interst in the remaining areas. Examples of jobs in the technology area and for which Mr. A.A. has shown some interest would be shoe repairman, electrical appliance repairman, watchmaker, medical laboratory assistant, and office machine repairman. He expressed a high degree of interest in the last position noted.

The Cornell Medical Index Health Questionaire was administered. This questionaire is designed to determine if a person has an unusual degree of interest or concern for specific areas of their body and also attempts to pick up on various mood and feeling patterns. As might be expected, Mr. A.A. demonstrated a high degree of concern or interest for his musculeoskeletal system. He demonstrated some degree of interest or concern for his eyes, respiratory system, cardiovascular system, digestive tract, and nervous system. Some feelings of inadequacy, depression, anxiety, sensitivity, anger, and tension were also indicated. With regards to the depression, Mr.A.A. indicates that he does not want to talk with anyone or take any medication to help control his depression. I am unsure as to the degree of his depression. At times it did appear that he might be rather severely degressed, especially when he talked about his current financial and physical condition.

ASSETS:

1. Makes a good appearance and first impression.
2. Believes he is capable of performing sedentary and light work as defined in the D.O.T.
3. Good ability to work quickly and skillfully with his hands.

LIABILITIES:

Intelligence and academic background may limit Mr. A.A. from highly skilled or technical jobs, although I do not see this as an absolute. Mr.A.A. does seem to have rather high aspirations.

RECOMMENDATIONS:

1. I believe Mr. A.A. would be a good candidate for employment as a forklift operator at Mobile Craft Wood Products. He does have some experience with the forklift. You may want to talk with Mr. W.W., Production Manager about this. I discussed this position and pay briefly with Mr. A.A. and he indicated he would be interested.

2. Mr.A.A. is interested in upgrading his basic education skills and possibly continuing his education after that. I have encouraged him in this.

3. Mr. A.A. seems particularly interested in office machine repairs. Mr. S.S. had a client who went throuh a home study course in this not too long ago. Perhaps Mr. S.S. could supply some information on this.

4. Mr.A.A. and I have gone over the course work requirements for many of the technical traiing programs at the Junior College. I believe he would experience major difficulties with any of the technical programs although he could probably succeed in the television repair course with some difficulty and by use of the remedial training program which the college offers.

Identifying Information

Name: X
Student No.: 00001 D.O.B.: 000
Date of Visit: 6/27/77, 7/1/77
Father: Y
Mother: Z

Family Background

The above named student resides with his natural mother and father. There are no other siblings. There are also no other relatives residing with them. She also related that no other family members have any significant physical or mental problems. Y indicated that his father died as the result of a cerebral hemmorage.

There are other relatives living in the states of Illinois and Michigan, also Canada.

The family has relocated several times, Z reiterating that they lived several years in the city of Gardenville, New York, approximately six miles from Buffalo, New York. They later relocated to Vermillion, Ohio where they resided for eight years, then finally settling here in Florida. The family has also traveled extensively to upper Michigan, Wisconsin, Ohio, New York and also Ontario, Canada, the home of the maternal grandmother.

Concerning employment, Y indicated that he completed a 13 year career with the United States Army. Afterwards he was employed as a millwright with the Ford Motor Company for 20 years.

Z's career began with a five year tour of duty with the Royal Canadian Air Force. Her rank was that of Sargeant. Afterwards she was employed as a nurse at the Lorain Community Hospital in Lorain, Ohio. At the present, Z is employed at the M.C. Hospital as an L.P.N.

X's employment experiences were that of an electrician's helper for 8 months. One month at Ford Motor Company, after which Z indicated that he couldn't learn fast, and that his supervisor gave him a difficult time. She further stated that he layed cement blocks in Sandusky, Ohio for three weeks.

Geographic Location and Living Conditions

The family resides in a mobile home located on the Foxwood Farms Acreage. The home can be reached by traveling west by way of Highway 27, and approximately five minutes after passing under the Interstate 75 overpass. The home is located on the left side of the highway.

The nearest schools are Howard Middle, Vanguard High, and Central Florida Community College. The nearest shopping area to the family's home is that of Jiffy Food Store, N.W. Blitchton Rd., and Simmons Meat Market that's located adjacent to the Jiffy Food Store. Pine Street Shopping Center and Gibson's Discount Center are frequently patronized by the family. The nearest medical facilities are the Marion Community and Munroe Memorial Hospitals. The family's physician's office is located in the Marion Medical Park, 1500 S.E. Magnolia Avenue, near the hospitals.

Concerning their housing arrangements, the mobile home has a living room, 2 bedrooms and a bath and a half. The home is adequately furnished with hot and running water from an electric pump and well system. All appliances and utilities are electrical with the exception of gas utilities for cooking and heating. There is a carport for the cars. The family maintains two cars, a 1969 Dodge 440 and a 1970 Maverick that is in need of repairs. It is presently in storage at the Citgo Service Station at the intersection of Pine Street and Road 200. This is the car used by the student, and the mother reiterates that the student is having transportation difficulties at the present, especially in keeping appointments for job interviews.

Family Income

Y is medically retired and at the present, he collects $214.00 per month from Social Security benefits. He is enrolled in the Ford Motor Company's Blue Cross, Blue Shield insurance program. Z is employed at the M.C. Hospital as an L.P.N., and earns $184.00 every two weeks. X does not contribute any income, and has to depend upon his parents for support. This family does not participate in the food stamp, nor the Medicare Programs, no state assistance, veterans benefits, or retirement benefits except Social Security for the father are received.

Medical and Health History of Student and Family

The mother reiterated that the prenatal care and development of this student was normal until the seventh month, of which he was born one day afterwards. He was then placed in an incubator for one month. Z further reiterated that many of the babies born prematurely and placed in incubators during the year of 1952 became victims of blindness. This being the result of too much oxygen intake, and that after being researched, scientists improved the respiratory regulators on the incubators by using a mixture of gases. According to Z, her son was born in Gardenville, New York. He began sitting up independently at the interval of four to six months of age, but he was unusually late beginning to walk, and that Z pointed out that she carried X to an eye specialist (Opthalmologist) in the city of Buffalo, New York and was prescribed lenses, after which he began to walk normally. At 16 months of age X used a spoon independently and verbalized frequently striking the sppon against the table and saying Ma! Ma! Ma! Ma! repeatedly. He was toilet trained at the age of one year old, but had to be retrained due to the fact that he had to be admitted to the Army Hospital, Fort Eustis, Virginia for treatment of pneumonia. Other medical treatments include a tonsilectomy at the age of four (Buffalo, N.Y.) and an appendectomy at the age of six (Oberlin Hospital, Ohio).

X was referred by this counselor to the M.C. Mental Health Unit for testing. Refer to the enclosed letter of Dr. R.P., Ph.D. Later, X was referred to the Division of Vocational Rehabilitation. Consultation with Mr. M.O., counselor with D.V.R. suggested that a complete neuropsychological battery would be in order of preference. Mrs. M.A.C. of the Clinical Psychology Section of the Shands Teaching Hospital scheduled an appointment for X to be tested. Refer to the enclosed letter from Dr. J.G., M.D. and Dr. P.S., Ph.D.

Y indicated that his health condition was diagnosed as that of cardiovascular and/or cerebrovascular disease. Ambulation is extremely slow, characterized by a crippled walking gait, as he ambulates with a cane. "Intention tremor" was observed upon sitting down. His prescribed medication is (Comidian, 5 mg.). He must ingest 1 per day for the remainder of his life. Dr., M., a cardiovascular specialist, is his physician.

Z asserted that she works the night shift at the hospital, from 11:00pm to 7:00am inferring that Y has to have someone to assist him through his daily routine of self care activities. X has to assist him at night while Z has to lose sleep through the day to assist him.

Z further asserted that Y's physician encouraged him to relocated to a warm climate for health reasons, thereby their reason for settling in the state of Florida. Z's condition was diagnosed as Diabetes Mellitus (sweet diabetes) and has been prescribed the medication (Dibanese) 1 per day. Her physician is Dr. W.H.L., S.E. Magnolia Avenue, Ocala, Florida.

March 19, 1974: Neuropsychological Testing, Shands Hospital and Clincs, University of Florida. Dr. J.G., M.D. and Dr. P.S., Ph.D.

Basic History: X is a 22 year old white male CFCC student from Ocala, Florida referred by V.R. for evaluation for possible perceptual impairment. He was recently rejected by USAF because of "low scores" and enrolled in a remedial program but is making little or no progress.

X was the second born and sole survivor of premature twins. He recalls no developmental milestones but denies a history of head trauma, CNS infections, seizures, etc. Throughout his schooling he had major academic problems and was in special education classes almost continuously.

He managed to graduate from high school somehow and worked at several jobs for short periods. His best job, and the one he enjoyed most, was 8 months spent assisting an electrician.

X utilizes denial effectively and healthily in dealing with past frustrations and failures. He is friendly, articulate, cooperative, and appears motivated. He has always been left-handed.

Test Data: X was given a Neuropsychological battery on 3/19/74. See attachment for results.

Interpretation: The test pattern is consistent with a mild static brain dysfunction which is most compatible with a possible birth injury. There is an impairment in intellectual functioning with marked discrepancy between verbal and performance abilities (VIQ=89, PIQ=70, FIQ=80). The low PIQ of 70 indicates particular difficulty in processing non-verbal spatial information. This deficit was also seen in his non-verbal memory (FRT=7) and his somato-sensory learning with the left hand on the Formboard (L=6x, R=4x).

However, the pattern of deficits are not clearly localized and do involve a number of language and fine motor functions, also. In other words, we are probably seeing the long term effects of a brain injury, which, while chronic-static in nature, involves diffuse functional systems. Although X can express himself well, his reading and writing skills are grossly limited.

On a more prognostic level, it should be pointed out that X has an exceptional ability to retain new verbal information and his communication skills are adequate.

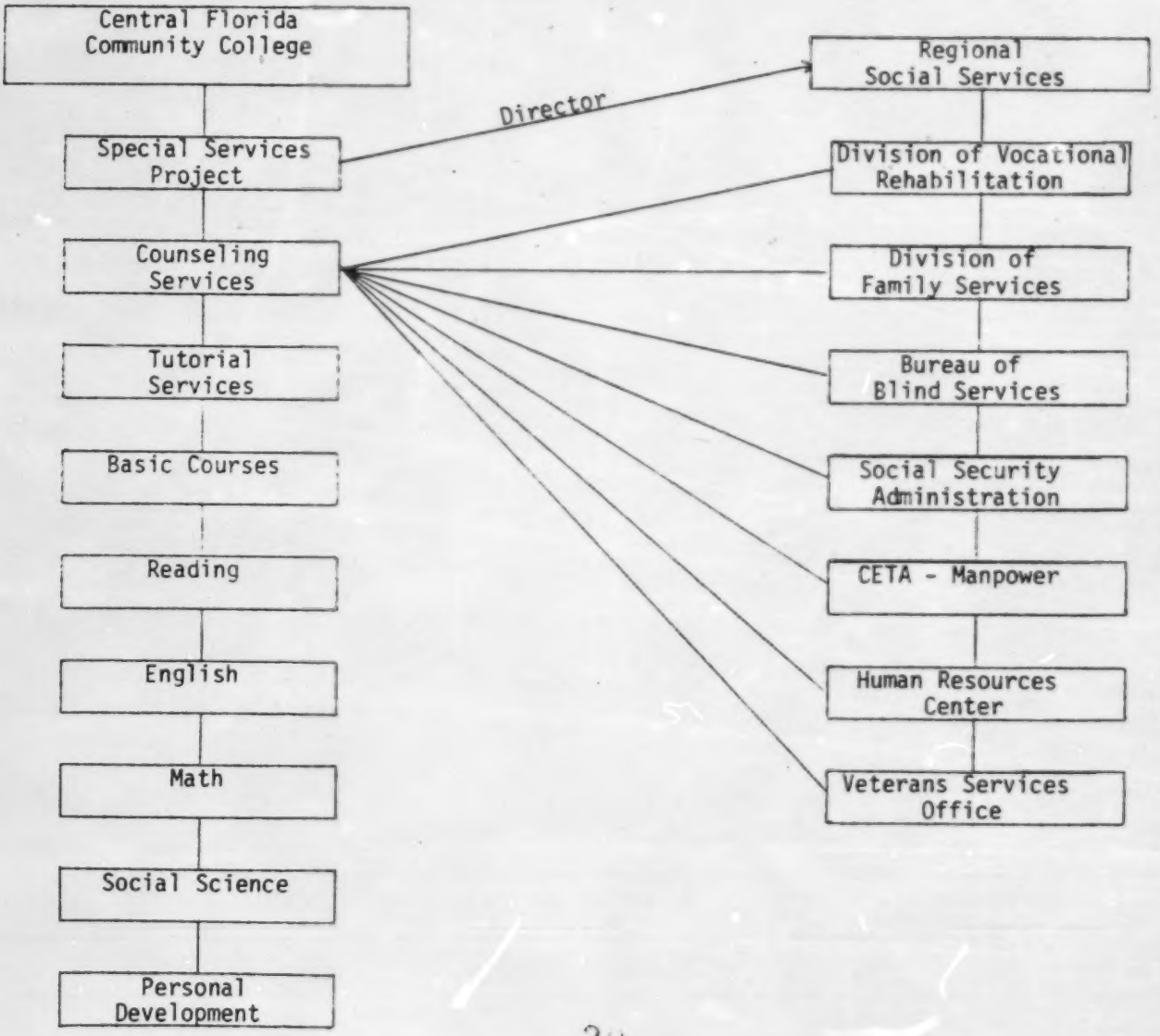
Recommendations: We feel that X would be a most suitable candidate for V.R. Training, but must caution that the choice of training be based both on aptitude and interest. He professes an interest in electronics and has past experience in this area. Perhaps this would be a suitable skill area but again we must caution that his spatial skills are limited. Other possibilities should take advantage of his verbal memory and fluency (telephone operator, sales work, etc.)

X is unlikely to profit from his present remedial college courses, which in fact prove quite frustrating to him, and should probably withdraw.

In order to take advantage of his present high motivational level a retraining program should be initiated as soon as possible.

As a somewhat related topic, crude testing of his visual fields indicated a mild superior bitemporal field defect and an opthalmologist might be consulted some time in the future.

THE REFERRAL SYSTEM



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